

Formula Prescriptions

Food Package III vs. Contract
Formula



Objectives

- To understand the difference between the contract and exempt formulas
- To understand when to use the Similac Rx form vs. the Medical Rx
- To understand what food package 3 is and when it is appropriate
- To understand the RD role in Rx approvals and referrals
- To understand the process for ordering and receiving special formulas
- To understand what Medicaid will cover and how
- To discuss and clarify any outstanding questions or concerns

Definitions

- Contract Infant Formula—All infant formula (except exempt formulas) produced by the manufacturer awarded the infant formula cost containment contract.
 - Similac Advance, Mead Johnson ProSobee (options, do not require Rx)
 - Similac Sensitive, Similac for Spit Up, Similac Total Comfort
 - 19 calorie/oz. (require rx, NOT considered medical/exempt formula)
 - May be approved by CPA

Definitions

- Exempt Infant Formula—Infant formula which meets the requirements for an exempt infant formula under section 412(h) of the Federal Food, Drug and Cosmetics Act (21 USC 350a(h)) and the regulation at 21 CFR parts 106 and 107. These formulas are intended for use by an infant with special medical or dietary needs.

Definitions

- WIC-eligible Nutritionals—Nutritional products included in a medical treatment protocol, that serve as a therapeutic agent for life and health maintenance and/or are required to treat an identified medical condition.

All Prescriptions

- Are all areas complete (medical rx)?
- Correct prescription for product?
- Is it within 30 days of request to WIC?
- Is the diagnosis/justification appropriate for the item prescribed?
- Signature, credentials and dated?
- Does this person have prescriptive authority in Montana? (RNs do not and may not sign for the health care provider)

Similac Formula Prescription

- USDA determined they require an rx
- May be approved by a CPA
- Does not meet criteria as “exempt” formula
- Reasons for issuance do not have to be legitimate medical conditions
- Do not require food section to be completed
- Cannot issue more formula in place of food at 6 months (see other rx if this is needed)

Food Package III

- Require Medical prescription
- Approval by Registered Dietitian (RD)
- Check box (Health Information), scan rx, risk codes, notes
- Requires a formula or eligible “Nutritional”
 - May add whole milk if in addition to formula
- Examples:
 - Exempt formulas (Neosure for prematurity, Elecare for milk/soy allergy...)
 - Contract formula (tube feeding, infant formula >1 year)
 - Nutritional (Pediasure for Failure to Thrive)

FP III and RD Approval

- Assessment of the participant's information—growth, notes, information from parent, prescription diagnosis, items requested, prescription duration
- Assign nutrition risk factors related to dx
- Document chart (or scan note) assessment results, changes in duration, approval and/or additional modifications needed from health care provider rx
- Make referrals based on high risk referral list

Exempt Infant Formula and WIC-Eligible Nutritionals Resource

- WIC Works Formula Database
 - Includes all types of products approved for use in WIC
 - <http://wicworks.nal.usda.gov/wic-formula>
 - Company web-sites for health professionals
- Some products may not be approved by MT WIC

Supplemental Foods & FPIII

- MD may defer to RD—this is encouraged!
- Subbing more formula for foods on infant package for 6-11 month olds (prematurity, oral/motor skills delayed, severe allergies...)
- Tube feeding with no/very limited oral feeding
- Treatment of diagnosed medical condition eliminates foods WIC offers (i.e. metabolic diets, ketogenic diet)
- May be other exceptions—please discuss with State Nutritionist (not simply an option)

Inappropriate Use of FP III

- Enhancing nutrient intake
- Managing body weight (does not eliminate FTT)
- Infants with:
 - Non-specific formula or food intolerance
 - Diagnosed formula intolerance or food allergy that does not require an exempt infant formula
- Participant with a lactose intolerance or milk protein allergy which can be managed with another food package (i.e. soy, lactose free milk)

Ordering Procedure

- Approval by RD
- Available at store? If yes, print on checks
- Figure out how much is needed (see chart in chapter 8)
- Email Kate AND Chris with:
 - Formula (details), how much, state ID, where to ship, who to ship to, expedite (first time orders)
- When it arrives, email Mark Squires and cc Kate and Chris
- First time order??
 - *One month trial*

Consider Other Sources

- Medicaid coverage:
 - **Tube feeding**
 - Medical condition causing malabsorption
 - Must have appropriate medical form
 - Must be followed by RD
- Refer to Children with Special Healthcare Needs for follow up